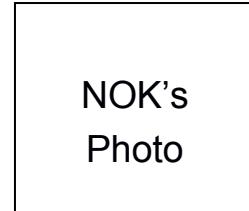
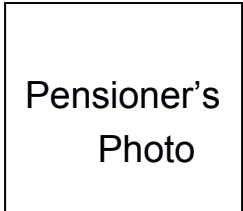


MPB FORM 200A

MILITARY PENSIONS BOARD
RECORDED NEXT-OF-KIN MILITARY PENSIONER INDEMNITY FORM



1. Pensioner's Details:

- a. Name.....
- b. Service Number.....
- c. Rank.....
- d. MPB Number.....
- e. Residential Address
- f. Postal Address
- g. Email Address
- h. Bank Name and Address
- i. Account Number.....
- j. Bank Verification Number (BVN).....

2. NOK's Details:

- a. Name.....

RESTRICTED

- b. Date of Birth.....
- c. Relationship to pensioner.....
- d. Tel Numbers
- e. Residential Address
- f. Postal Address.....
- g. Email Address
- h. Marital Status.....
- i. Name of Spouse.....
- j. Employee/Office Address.....
- k. Designation.....
- l. Nigerian Bank Name and Address.....
- m. Nigerian Bank Account Number.....
- n. Nigerian Bank Verification Number (BVN)

3. NOK Certification:

I hereby depose that I am the true and certified NOK of the above mentioned military pensioner.

I have verified the details of the pensioner and ascertained on my honour that they are correct. I fully understand that it is my responsibility to promptly inform the Military Pensions Board of any changes/updates affecting the pensioner (including death).

RESTRICTED

I am liable to be prosecuted in accordance to extant laws for fraud/liabilities incurred against public funds arising from my responsibility as NOK. Signature.....

4. In the presence of:

- a. Name.....
- b. Occupation.....
- c. Address.....
- d. Signature.....

Dated this.....Day of2018

Before me

Commissioner for Oath/Notary Public